

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE	CASE NO. <b>TX 11590</b>
<p align="center"><b>OFFICIAL WARNING</b></p> <p align="center"><b>VIOLATION OF FEDERAL REGULATIONS</b></p>	VIOLATOR
	<b>Stillmeadow, Inc.</b> <b>74-R-0049 / 1503</b> <b>74-B-0254 / 5520</b>
	ADDRESS (Street, City, State, Zip Code)  <b>12852 Park One Drive</b> <b>Sugar Land, TX 77478</b>

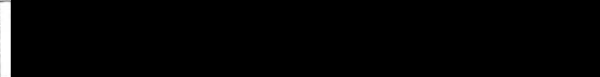
The Department of Agriculture has evidence that on or about **June 22, 2011**, you or your organization committed the following violation of Federal Regulations:

**Section**

**3.2(b) Indoor Housing Facilities....DIRECT.....**failure to sufficiently ventilate the facility to provide for the animals health and well-being, to minimize odors, drafts, ammonia levels and moisture condensation

**3.6(a)(2)(x) Primary enclosures....DIRECT.....**failure to properly construct and maintain all surfaces such that the floors of the primary enclosures protect the animals' feet and legs from injury and do not allow the animals' feet to pass through any openings in the floor

Titles 7 & 9 Code of Federal Regulations were promulgated to help prevent the spread of animal and plant pests and diseases and assure the humane treatment of animals. Since violations of the regulations can have serious and costly impact detrimental to the public interest, you are warned of this violation. Any further violation of these regulations may result in the assessment of a civil penalty or criminal prosecution. If you have any questions concerning this warning or violation, please contact the listed APHIS Official.

APHIS OFFICIAL (Name and Title)		OFFICE ADDRESS:
<b>Robert M. Gibbens, Director</b>		2150 Centre Ave. Building B, MS3W11
SIGNATURE	DATE ISSUED	Fort Collins, CO 80526
	8/23/11	TELEPHONE NO. AC (970) 494-7478
FOR PERSONAL SERVICE - RECEIVED BY: (Name and signature)		DATE RECEIVED:
FOR CERTIFIED MAIL - RECEIPT NO: 7011 0110 0001 6116 3300		
APHIS FORM 7060 (JUN 91)		
Previous editions may be used PART 1 - VIOLATOR		